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Bib Data Sheet

CONFIRMATION NO. 6820

|  |   |   |                        |                                     |
|--|---|---|------------------------|-------------------------------------|
| SERIAL NUMBER<br>10/522,804  | FILING OR 371(c)<br>DATE<br>09/22/2005<br>RULE  | CLASS<br>019  | GROUP ART UNIT<br>3765 | ATTORNEY<br>DOCKET NO.<br>0539-1018 |
| <b>APPLICANTS</b><br>Christian Paire, Bonnefamille, FRANCE;<br>Thierry Lanier, Vienne, FRANCE; |   |   |                        |                                     |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/FR03/02423 07/30/2003      |   |   |                        |                                     |
| <b>** FOREIGN APPLICATIONS *****</b><br>FRANCE 02/09772 07/31/2002                             |   |   |                        |                                     |
| Foreign Priority claimed   | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR<br>COUNTRY<br>FRANCE   | SHEETS<br>DRAWING      | TOTAL<br>CLAIMS<br>14               |
| 35 USC 119 (a-d) conditions met  | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance          |   |                        | INDEPENDENT<br>CLAIMS<br>1          |
| Verified and<br>Acknowledged   | Examiner's Signature  | Initials  |                        |                                     |
| <b>ADDRESS</b><br>466  |   |   |                        |                                     |
| <b>TITLE</b><br>Fireproof composite yarn comprising three types of fibers                      |   |   |                        |                                     |
| FILING FEE<br>RECEIVED<br>1030   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                        |                                     |